

**Gail Long**  
**17012 Lomond Blvd.**  
**Shaker Hts. OH 44120**

July 31, 2016

Sylvia Matthews Burwell, Secretary  
Department of Health and Human Services  
200 Independence Ave., SW  
Washington, DC 20201

Dear Secretary Burwell,

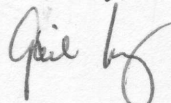
I write in opposition to the 1115 Waiver submitted to the Department of Health and Human Services by the State of Ohio's Department of Medicaid. The Department was required by HB 64, the State's Biennium Budget Bill, to submit this Waiver request.

It is my strong opinion that the requirement as drafted and passed by the Legislature was not to create the Healthy Ohio Program to improve access to health care services via the Medicaid program but rather to reduce the number of eligible Ohioans from the Medicaid rolls. Even the State's Waiver application estimates that over 100,000 individuals could be dropped from the Program. It is important to remember that this Legislature did not support Governor John Kasich's proposal to expand Medicaid under the Affordable Care Act. The Governor was forced to go to the State's Controlling Board for approval.

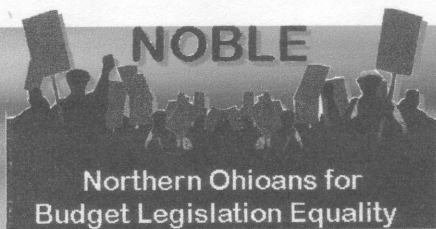
Key to any Waiver application is the assessment of whether or not it will produce results that are budget neutral. I cannot see how this will happen as what has been proposed indicates an increased amount of administrative activity – activity that will have to monitor whether or not monthly co-payments have been made, activity that will keep track of whether or not an enrollee has signed up and participated in healthy activities; re-enrolling consumers who have been kicked off of Medicaid for failure to make their co-pays; and most importantly, the increased cost of providing care in emergency rooms because consumers are no longer eligible for "Healthy Ohio" due to lack of payment. If approved, "Healthy Ohio" will cost the State more money and not less.

I urge you to turn down the State of Ohio's 1115 Waiver request. The purpose of the proposal is to deny access rather than to focus on a truly healthier population that has continued access to primary health care services.

Sincerely,



Gail Long



NOBLE  
3500 Lorain Ave. • Cleveland Ohio • 44113  
(p) 216.651.2606 (f) 216.651.2633  
[www.organizeohio.org/NOBLE](http://www.organizeohio.org/NOBLE)

August 1, 2016

Sylvia Matthews Burwell, Secretary  
Department of Health and Human Services  
200 Independence Avenue, SW  
Washington DC 20201

Dear Secretary Burwell,

Northern Ohioans for Budget Legislation (NOBLE) is a coalition of individuals and organizations committed to bring the voice of the low income and poor to the biennium State of Ohio Budget process. Because Medicaid is a key line item in the State's Budget, we feel that is important to express our concerns about the 1115 Waiver submitted to CMS for approval. As submitted, we do not feel that it meets the current criteria used to judge the merits of such a waiver. The Healthy Ohio Plan does not increase coverage; it will not increase the current provider network; it will not improve health outcomes; it will not increase efficiency or quality of care and it will not be budget neutral.

**Increase coverage:** Ohioans earning between 100 and 138% of the Federal Poverty Guidelines will not be able to pay into a health savings account. For many people earning \$8.10 an hour, an \$8.25 monthly co-pay will be impossible to pay once rent, food, clothing and transportation are taken into consideration. The expansion of Medicaid as proposed by Governor Kasich and approved by the State Controlling Board was a godsend for thousands in the State who previously had not been able to afford health care coverage of any kind. The Department of Medicaid states itself in the Waiver application that people will drop off because of this expense. This is a **decrease and not an increase** in coverage.

**Increase in provider network:** The changes to presumptive eligibility will decrease the number of providers willing to accept Medicaid patients. Elimination of the 90 day period for which Medicaid currently pays medical expenses prior to the application date is detrimental for both the consumer and the provider. Without this provision, both will be faced with financial stress.

**Improvement of Health Outcomes:** For those who have been dropped from the Healthy Ohio Program due to past due co-pays, the emergency room will once again become their provider of choice. These individuals will seek care when they are sick and will not engage in preventive care or follow up on necessary care, including medication, because they cannot afford it. This will do nothing to improve health outcomes and in our opinion will continue to increase the gap between the rich and the poor when it comes to health outcomes.

**Increase efficiency or quality of care:** Administrative efficiency will be compromised. How will the co-pays be collected from people who do not have bank accounts? Whose responsibility will it be to collect the co-pays - banks, managed care organizations, the Department of

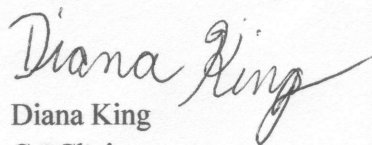


## Healthy Ohio 1115 Waiver

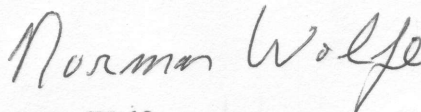
Medicaid? As described in their application, the health savings account mechanism will be extremely complicated and difficult to both administer and monitor. Keeping track of the health savings account will most certainly take precedence over the quality of care one receives as collecting money from people who cannot afford it and kicking them off of Medicaid if they do not pay seems to be the priority.

**Budget neutral:** How can something be budget neutral when such a huge layer of administrative work will be necessary? Perhaps the hope is that so many people will be dropped from the program and in that way, money will be saved.

Thank you for the opportunity to submit our thoughts and opinions.



Diana King  
Co-Chair



Norman Wolfe  
Co-Chair

July 27, 2016

Sylvia Matthews Burwell, Secretary  
Department of Health and Human Services  
200 Independence Ave., SW  
Washington DC 20201

**Subject: Public Comment(s) regarding Ohio's Submission to the Center for Medicaid and Medicare Services for an 1115 Waiver known as Healthy Ohio**

My name is Lisa Clock and I am a Medicaid consumer in the State of Ohio. The 1115 Waiver as submitted for approval to CMS will directly affect me as I am not disabled nor am I a pregnant woman or under the age of 18.

What concerns me about this Waiver application is that there is a very real possibility that it will harm more people rather than it will help. It is my opinion that many, many people will be cut off the program because it requires payments from people like myself who are on very limited incomes and the program will become extremely complicated and burdensome. If approved, the Waiver will ultimately force people off of Medicaid. For many of us, the State of Ohio's expansion of Medicaid under the provisions of the Affordable Care Act was the first time in our adulthood that we have had regular access to health care. If we are to stay healthy, the program as it currently exists must continue.

Here are my major concerns:

- ☒ Making a regularly monthly payment into a health savings account will be nearly impossible as I have a very limited income. Housing, food and transportation costs must come first.
- ☒ If I were dropped from the program, it would be next to impossible for me to pay what I owe plus the required payment to get back onto Medicaid.
- ☐ I do not have a bank account, nor could I afford the charges if I did set one up in order to pay the monthly co-pay.
- ☒ I have a chronic illness (lung, heart, diabetes, hypertension, etc.) that if goes untreated because I lost Medicaid coverage would create more serious health problems and end up costing the State even more if I have to access my care through the emergency room.

I urge you to NOT approve the State of Ohio's 1115 Waiver application.

Sincerely,

*Lisa Clock*



July 27, 2016

Sylvia Matthews Burwell, Secretary  
Department of Health and Human Services  
200 Independence Ave., SW  
Washington DC 20201

**Subject: Public Comment(s) regarding Ohio's Submission to the Center for Medicaid and Medicare Services for an 1115 Waiver known as Healthy Ohio**

My name is Jacqueline Janas and I am a Medicaid consumer in the State of Ohio. The 1115 Waiver as submitted for approval to CMS will directly affect me as I am not disabled nor am I a pregnant woman or under the age of 18.

What concerns me about this Waiver application is that there is a very real possibility that it will harm more people rather than it will help. It is my opinion that many, many people will be cut off the program because it requires payments from people like myself who are on very limited incomes and the program will become extremely complicated and burdensome. If approved, the Waiver will ultimately force people off of Medicaid. For many of us, the State of Ohio's expansion of Medicaid under the provisions of the Affordable Care Act was the first time in our adulthood that we have had regular access to health care. If we are to stay healthy, the program as it currently exists must continue.

Here are my major concerns:

- ☒ Making a regularly monthly payment into a health savings account will be nearly impossible as I have a very limited income. Housing, food and transportation costs must come first.
- ☒ If I were dropped from the program, it would be next to impossible for me to pay what I owe plus the required payment to get back onto Medicaid.
- ☒ I do not have a bank account, nor could I afford the charges if I did set one up in order to pay the monthly co-pay.
- ☒ I have a chronic illness (lung, heart, diabetes, hypertension, etc.) that if goes untreated because I lost Medicaid coverage would create more serious health problems and end up costing the State even more if I have to access my care through the emergency room.

I urge you to NOT approve the State of Ohio's 1115 Waiver application.

Sincerely,

*Jaqueline Janas*  
2902 Cypress  
Cleveland OH 44109

July 27, 2016

Sylvia Matthews Burwell, Secretary  
Department of Health and Human Services  
200 Independence Ave., SW  
Washington DC 20201

**Subject: Public Comment(s) regarding Ohio's Submission to the Center for Medicaid and Medicare Services for an 1115 Waiver known as Healthy Ohio**

My name is Annette Mickey and I am a Medicaid consumer in the State of Ohio. The 1115 Waiver as submitted for approval to CMS will directly affect me as I am not disabled nor am I a pregnant woman or under the age of 18.

What concerns me about this Waiver application is that there is a very real possibility that it will harm more people rather than it will help. It is my opinion that many, many people will be cut off the program because it requires payments from people like myself who are on very limited incomes and the program will become extremely complicated and burdensome. If approved, the Waiver will ultimately force people off of Medicaid. For many of us, the State of Ohio's expansion of Medicaid under the provisions of the Affordable Care Act was the first time in our adulthood that we have had regular access to health care. If we are to stay healthy, the program as it currently exists must continue.

Here are my major concerns:

- ☐ Making a regularly monthly payment into a health savings account will be nearly impossible as I have a very limited income. Housing, food and transportation costs must come first.
- ☐ If I were dropped from the program, it would be next to impossible for me to pay what I owe plus the required payment to get back onto Medicaid.
- ☐ I do not have a bank account, nor could I afford the charges if I did set one up in order to pay the monthly co-pay.
- ☐ I have a chronic illness (lung, heart, diabetes, hypertension, etc.) that if goes untreated because I lost Medicaid coverage would create more serious health problems and end up costing the State even more if I have to access my care through the emergency room.

I urge you to NOT approve the State of Ohio's 1115 Waiver application.

Sincerely,

*Annette Mickey*



July 27, 2016

Sylvia Matthews Burwell, Secretary  
Department of Health and Human Services  
200 Independence Avenue, SW  
Washington DC 20201

Dear Secretary Burwell:

My name is Michael Clock and I am a relative of a Medicaid consumer in the State of Ohio. The 1115 Waiver as submitted by the State of Ohio will directly affect my niece.

My real concern is that it will harm more people that it will help. Many people will be cut off of the program because it requires payments from people like my niece who is on a very limited income. I also think this "new" program will create a bureaucratic mess. If approved, this program will force people off of Medicaid, and these will probably be the people who need it the most. Cutting people off should certainly not be the intent of "Healthy Ohio."

Please review the 1115 Waiver and look at it through the eyes of someone who really needs the help! Discuss it with those individuals and hear what they have to say.

Respectfully,

A handwritten signature in black ink, appearing to read "Michael Clock", written in a cursive style.

Michael Clock

July 31, 2016

Sylvia Matthews Burwell, Secretary  
Department of Health and Human Services  
200 Independence Avenue, SW  
Washington DC 20201

Dear Secretary Burwell,

It has been reported that Ohio underspent its Medicaid budget by over a billion dollars even with 650,000 new Medicaid recipients. Over 50% of these enrollees are working but cannot afford health care. My 44 year old niece is one of these people. She has not been able to find steady work for over a year and her present job is only two days a week. Like many she does not have a checking account, changes jobs fairly regularly to increase her pay and moves more than many in order to live where her rent is more affordable. How will the Healthy Ohio program monitor all of my niece's changes? And I can say with certainty that \$8.25 per month co-pay will be a hardship on her.

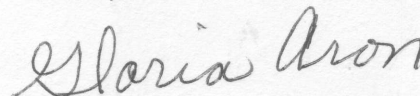
The State of Ohio has forgotten that Medicaid was created to provide health care for the poor and low income? The 1115 Waiver as submitted to HHS does just the opposite. Consumers who are dropped from the Medicaid program because they are unable to make monthly health savings account payments will go back to using the more expensive emergency room for their care. Many in Cuyahoga County will return to our publicly owned hospital's rating system. With the elimination of presumptive eligibility as proposed in the Waiver and the cuts to the Federal DISH Program, MetroHealth along with other providers will see a significant drop in their revenues.

From all that I have read, I believe that the Healthy Ohio program will be very expensive to set up and administer. Many Ohioans who need Medicaid the most will lose it. It also appears that Ohio's plan has components, such as imposing yearly and life time caps on coverage, that go against the Affordable Care Act.

I am not convinced that Ohio's plan will provide a better Medicaid program or in any way be a cost savings. Remember, Ohio's taxpayers overwhelmingly supported Medicaid expansion as proposed by Governor Kasich. We believe that all Ohio citizens should have access to health care. By the State's own figures, under the expansion, the expansion has been a win-win for both the State and for the consumers.

The State made virtually no changes to their Waiver proposal after they received comments from the public. I urge CMS to not approve Ohio's 1115 Waiver submission.

Sincerely,



Gloria Aron  
2123 W. 81<sup>st</sup> St.  
Cleveland OH 44102



July 27, 2016

Sylvia Matthews Burwell, Secretary  
Department of Health and Human Services  
200 Independence Ave., SW  
Washington DC 20201

**Subject: Public Comment(s) regarding Ohio's Submission to the Center for Medicaid and Medicare Services for an 1115 Waiver known as Healthy Ohio**

My name is Deborah E Lettau and I am a Medicaid consumer in the State of Ohio. The 1115 Waiver as submitted for approval to CMS will directly affect me as I am not disabled nor am I a pregnant woman or under the age of 18.

What concerns me about this Waiver application is that there is a very real possibility that it will harm more people rather than it will help. It is my opinion that many, many people will be cut off the program because it requires payments from people like myself who are on very limited incomes and the program will become extremely complicated and burdensome. If approved, the Waiver will ultimately force people off of Medicaid. For many of us, the State of Ohio's expansion of Medicaid under the provisions of the Affordable Care Act was the first time in our adulthood that we have had regular access to health care. If we are to stay healthy, the program as it currently exists must continue.

Here are my major concerns:

- ☒ Making a regularly monthly payment into a health savings account will be nearly impossible as I have a very limited income. Housing, food and transportation costs must come first.
- ☒ If I were dropped from the program, it would be next to impossible for me to pay what I owe plus the required payment to get back onto Medicaid.
- ☐ I do not have a bank account, nor could I afford the charges if I did set one up in order to pay the monthly co-pay.
- ☐ I have a chronic illness (lung, heart, diabetes, hypertension, etc.) that if goes untreated because I lost Medicaid coverage would create more serious health problems and end up costing the State even more if I have to access my care through the emergency room.

I urge you to NOT approve the State of Ohio's 1115 Waiver application.

Sincerely,

*Deborah E Lettau*

July 27, 2016

Sylvia Matthews Burwell, Secretary  
Department of Health and Human Services  
200 Independence Ave., SW  
Washington DC 20201

**Subject: Public Comment(s) regarding Ohio's Submission to the Center for Medicaid and Medicare Services for an 1115 Waiver known as Healthy Ohio**

My name is Diana King and I am a Medicaid consumer in the State of Ohio. The 1115 Waiver as submitted for approval to CMS will directly affect me as I am not disabled nor am I a pregnant woman or under the age of 18.

What concerns me about this Waiver application is that there is a very real possibility that it will harm more people rather than it will help. It is my opinion that many, many people will be cut off the program because it requires payments from people like myself who are on very limited incomes and the program will become extremely complicated and burdensome. If approved, the Waiver will ultimately force people off of Medicaid. For many of us, the State of Ohio's expansion of Medicaid under the provisions of the Affordable Care Act was the first time in our adulthood that we have had regular access to health care. If we are to stay healthy, the program as it currently exists must continue.

Here are my major concerns:

- ☒ Making a regularly monthly payment into a health savings account will be nearly impossible as I have a very limited income. Housing, food and transportation costs must come first.
- ☒ If I were dropped from the program, it would be next to impossible for me to pay what I owe plus the required payment to get back onto Medicaid.
- ☒ I do not have a bank account, nor could I afford the charges if I did set one up in order to pay the monthly co-pay.
- ☒ I have a chronic illness (lung, heart, diabetes, hypertension, etc.) that if goes untreated because I lost Medicaid coverage would create more serious health problems and end up costing the State even more if I have to access my care through the emergency room.

I urge you to NOT approve the State of Ohio's 1115 Waiver application.

Sincerely,

Diana King  
2815 York Ave #3  
Cleveland, Ohio 44113